Claim # 17 Kenumber

	PATENT A	APPLICATIO Effect	N FEE DE	RD	1 0669 72 6								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16				[RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		* _			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=		1	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							' L	TOTAL	+	OR		7000	
CLAIMS AS AMENDED - PART II								IUIAL	<u>L</u>	OR	TOTAL OTHER	750	
		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
AME	Independent * Minus		***	- 01 0104	<u> </u> =	[X42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 [+140=		OR	+280≈		
							Ł	TOTA			TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEI	E L	J~	ADDIT. FEE		
В		CLAIMS REMAINING		HIGH NUMI	EST		Ţ		ADDI-	1		ADDI-	
NDMENT		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
NON	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> -</u>	1 [X42=	<u> </u>	OR	X84=		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDI				CLAIM		J ↾	+140=	<u> </u>	1	+280≈		
							L	TOTAL		OR	TOTAL		
(Column 1)(Column 2) (Column 3)								DDIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		HIGH	EST	(Column 3)	קול		1 4001	l		1001	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
QN.	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=		
AME	Independent	* ENTATION OF MU	Minus	***	C 01 0104	<u> </u>] [X42=	1	OR	X84=		
Ш	FINOT PHESE	NIATION OF MIC	JLIIPLE DEF	PNUENT	CLAIM		┛┞	+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
-	The "Highest Num	nber Previously Pai	d For" (Total o	r Independe	ent) is the	highest number	er four	nd in the a	ppropriate bo	x in col	iumn 1.		